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CONFIRMATION NO. 4091

SERIAL NUMBER 10/752,652	FILING OR 371(c) DATE 01/07/2004 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. 015005-9450-00
APPLICANTS Barry G. Anderson, Sheboygan, WI; Joseph M. Hand, Sheboygan Falls, WI; <i>UWA</i>				
** CONTINUING DATA ***** This application is a CIP of 10/657,432 09/08/2003 which is a CON of 09/819,243 03/28/2001 PAT 6,626,877 <i>UWA</i> which claims benefit of 60/192,751 03/28/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED <i>UWA</i> ** 04/10/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>UWA</i> Allowance Examiner's Signature Initials	STATE OR COUNTRY WI	SHEETS DRAWING 17	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 6
ADDRESS 23409				
TITLE Medical suction apparatus and methods for draining same				
FILING FEE RECEIVED 1046	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	